

**FW-007**Turn in this form with your Request  
for Hearing, FW-006.**CONFIDENTIAL**

Clerk stamps date here when form is filed.

**1 Person who asked for the hearing:**

Name: \_\_\_\_\_

Street or mailing address: \_\_\_\_\_

City: \_\_\_\_\_

Phone: \_\_\_\_\_

**Write your name and address in #1.  
Fill out #2 if you have a lawyer.****2 Lawyer (if you have a lawyer, fill out court number, e-mail, and State Bar number):** \_\_\_\_\_**SAMPLE ONLY****Do not fill out  
this form**

Fill out court name and street address:

Superior Court of California, County of \_\_\_\_\_

**Write in the court  
address here**

Fill in case number and case name:

Case Number: \_\_\_\_\_

**Write your Case Number here**

Case Name: \_\_\_\_\_

**Write your Case Name here****3 The court received your request for a hearing about your court fees on (date):** \_\_\_\_\_**Read this form carefully. All checked boxes ☒ are court orders.**

- 4** ☐ The court grants your request for a hearing on your eligibility for a fee waiver. **Go to your court hearing** on the date below. You may bring information about your financial situation to the hearing.

**Hearing  
Date**

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Dept.: \_\_\_\_\_

Rm.: \_\_\_\_\_

Name and address of court if different from above: \_\_\_\_\_

**5** ☐ The court **denies** your request for a hearing about your court fees on the date below.

- a. ☐ The hearing for a fee waiver is denied.
- b. ☐ No request for a hearing.
- c. ☐ Other (explain): \_\_\_\_\_

**Do not fill out  
anything else  
on this page.**

Final of the request

Date: \_\_\_\_\_

**Request for Access to  
language interpreter  
office for Request for**Clerk, Deputy  
Captioning, or sign  
contact the clerk's**Clerk's Certificate of Service**I certify that I am not involved in this case and (check one): ☐ A certificate of mailing is attached.☐ I handed a copy of this notice to the party and attorney, if any, listed in **1** and **2**, at the court, on the date below.☐ This notice was mailed first class, postage paid, to the party and attorney, if any, at the addresses listed in **1** and **2**, from (city): \_\_\_\_\_, California on the date below.

Date: \_\_\_\_\_

Clerk, by \_\_\_\_\_, Deputy